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Fill in this information to identify your ca	ise:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	-	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Elaine First Name Chew Middle Name	First Name Middle Name
	Bring your picture identification to your meeting with the trustee.	Lambros Last Name Suffix (Sr., Jr., II, III)	Last Name Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	First Name Middle Name Last Name	First Name Middle Name Last Name
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 7 6 7 2 OR 9xx - xx	xxx - xx
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	I have not used any business names or EINs. Business name	☐ I have not used any business names or EINs. Business name
	Include trade names and doing business as names	Business name	Business name

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Debtor 1 Elaine Chew Lambros		os	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
		EIN			
5.	Where you live	EIN	EIN If Debtor 2 lives at a different address:		
		2800 Maple Ave. Number Street Apt. 8-C	Number Street		
		Downers Crove II 60515			
		Downers Grove IL 60515 City State ZIP Code	City State ZIP Code		
		DuPage	<u> </u>		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street		
		Number Street			
		P.O. Box	P.O. Box		
		City State ZIP Code	City State ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
Р	art 2: Tell the Court Ab	out Your Bankruptcy Case			
7.	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top	Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.		
	are choosing to file under	Chapter 7			
		Chapter 11			
		Chapter 12			
		Chapter 13			

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Del	otor 1 Elaine Chew Lamb	oros		Case number	er (if known)		
8.	How you will pay the fee		I will pay the entire fee when I file my po court for more details about how you may pay with cash, cashier's check, or money of behalf, your attorney may pay with a credit	pay. Typically, order. If your at	if you are pay torney is sub	ring the fee yours mitting your payn	self, you may
			I need to pay the fee in installments. If Individuals to Pay Your Filing Fee in Insta				oplication for
			I request that my fee be waived (You may law, a judge may, but is not required to than 150% of the official poverty line that after in installments). If you choose this op Filing Fee Waived (Official Form 103B) ar	, waive your fee applies to your f tion, you must fi	, and may do amily size an Il out the App	so only if your ir d you are unable	to pay the
9.	Have you filed for		No				
	bankruptcy within the last 8 years?		Yes.				
	·	Distri	Northern District of Illinois			Case number	14-31097
		Distri	ct		M/DD/YYYY	Case number	
		Distri	ct		M / DD / YYYY		
10.	Are any bankruptcy		No	M	M / DD / YYYY		
	cases pending or being filed by a spouse who is		Yes.				
	not filing this case with	Debte	or		Relationsh	nip to you	
	you, or by a business partner, or by an	Distri				Case number,	
	affiliate?				M / DD / YYYY		
		Debte	or		Relationsh	nip to you	
		Distri	ct		M / DD / YYYY		
11.	Do you rent your residence?	-	No. Go to line 12. Yes. Has your landlord obtained an evice residence? No. Go to line 12. Yes. Fill out Initial Statement, and file it with this bankruptcy.	About an Eviction		·	

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Deb	tor 1 Elaine Chew Lambr	os			Cas	se number (if known)		
Pa	Report About Ar	ıy Bı	ısine	sses You Own as	a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of l	business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Name of business, if any Number Street				
				Single Asset Re	iness (as defined in al Estate (as defined defined in 11 U.S.C. ter (as defined in 11	11 U.S.C. § 101(27A)) I in 11 U.S.C. § 101(51 § 101(53A))		ode
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	can mos	set ap	filing under Chapter 11 propriate deadlines. If nt balance sheet, state f these documents do r	you indicate that you ment of operations, or	u are a small business cash-flow statement, a	debtor, you nd federal ir	must attach your ncome tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under (Chapter 11.			
	For a definition of small pusiness debtor, see		No.	I am filing under Chap the Bankruptcy Code		T a small business deb	otor accordin	ng to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	oter 11 and I am a sr	mall business debtor a	ccording to	the definition in the
Pa	Report If You Ov	vn o	r Hav	e Any Hazardous	Property or Any	Property That N	eeds Imn	nediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		No Yes.	What is the hazard?				
				If immediate attention	is needed, why is it	needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	? Number Street			
					City		State	ZIP Code

Debtor 1	Elaine Chew Lambros	Case number (if known)	
	- -		

15. Tell the court whether you have received briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Explain Your Efforts to Receive a Briefing About Credit Counseling

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am	not	requir	ed to	receive	a	briefing	about
cred	it co	unseli	ing b	ecause	of:		

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Part 6: Elaine Chew Lambros Answer These Ques		Elaine Chew Lambi		Case number (if known)					
		Quest	ions for Reporting Pเ	rpos	ses				
have? as "incu No Y Ye 16b. Are you money 1		nd of debts do you	16a.	as "incurred by an individence of the second	-	sumer debts? Consumer de rimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."	
		•	-	iness debts? Business debatement or through the operation		e debts that you incurred to obtain e business or investment.			
			16c.	State the type of debts yo	ou ow	e that are not consumer or bu	sines	s debts.	
17.	Are you Chapte	ı filing under r 7?		No. I am not filing under Chapter 7. Go to line 18.					
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?	Ø	· ·	•	•	•	xempt property is excluded and to distribute to unsecured creditors?	
18.		any creditors do imate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.		uch do you e your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you e your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

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Debtor 1	Elaine Chew Lamb	oros	Case number (if known)				
Part 7:	Sign Below						
For you		I have examined this petition, and I de and correct.	clare under penalty of perjury t	that the information provided is true			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did fill out this document, I have obtained	. , . ,				
		I request relief in accordance with the	chapter of title 11, United State	es Code, specified in this petition.			
		I understand making a false statement connection with a bankruptcy case can or both. 18 U.S.C. §§ 152, 1341, 1519	result in fines up to \$250,000				
		X /s/ Elaine Chew Lambros Elaine Chew Lambros, Debtor 1	X Signatur	re of Debtor 2			
		Executed on 01/27/2017 MM / DD / YYYY	Execute	d on			

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Debtor 1 Elaine Chew La	mbros	Case number (if know	vn)			
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	eligibility to proceed under Chapter relief available under each chapter the debtor(s) the notice required by	r 7, 11, 12, or 13 of title 11, United Star for which the person is eligible. I als y 11 U.S.C. § 342(b) and, in a case in	petition, declare that I have informed the debtor(s) about or 13 of title 11, United States Code, and have explained the he person is eligible. I also certify that I have delivered to § 342(b) and, in a case in which § 707(b)(4)(D) applies, ry that the information in the schedules filed with the petition			
	X /s/ Hyun Kim Signature of Attorney for Debto		01/27/2017 MM / DD / YYYY			
	Hyun Kim					
	Printed name					
	Hyun Kim					
	Firm Name					
	3758 W. Monstrose Ave.					
	Number Street					
	Chicago	<u>IL</u>	60618			
	City	State	ZIP Code			
	Contact phone (773) 604-88	77 Email address shaw	nkim_law@yahoo.com			
	6244603	IL				
	Bar number	State	_			

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Fill in this in	oformation to ic	dentify your case	and this filing:		
Debtor 1	Elaine	Chew	Lambros		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name		
United States B	ankruptcy Court for	the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number				☐ Check	if this is an
(if known)				amend	led filing
Official Forn	n 106A/B				
	VB: Property	/			12/15
filing together, b sheet to this form	oth are equally rem m. On the top of a	sponsible for supply ny additional pages,	ee as complete and accurate as ing correct information. If more write your name and case numb ng, Land, or Other Real Es	space is needed, attach a per (if known). Answer eve	separate ery question.
✓ No. Go	or have any legal to Part 2. here is the propert	•	t in any residence, building, land	l, or similar property?	
	-	•	of your entries from Part 1, inclinite that number here		\$0.00
Part 2: De	escribe Your V	ehicles			
•		•	n any vehicles, whether they are also report it on Schedule G: Execution	_	•
3. Cars, vans,	trucks, tractors, s	port utility vehicles,	motorcycles		
□ No ☑ Yes					
3.1. Make:	Nissan	Who has Check on	an interest in the property?	Do not deduct secured clai	•
Model:	Altima		or 1 only	Creditors Who Have Claim	
Year:	2003		or 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mile	age: 200,300	_	or 1 and Debtor 2 only ast one of the debtors and another		\$1,000.00
Other information	:				<u> </u>
2003 Nissan Al miles)	ltima (approx. 20		k if this is community property nstructions)		
			recreational vehicles, other vehicle, fishing vessels, snowmobiles, m		
✓ No □ Yes	•				
	-	•	of your entries from Part 2, incl	uding any	\$1,000.00

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Deb	tor 1	Elaine Chew Lambros	Case number (if known)	
Đ:	art 3:	Describe Your Personal and Household Items		
		or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware		
	□ No ✓ Yes	s. Describe Household goods, furnishings, appliances, etc.		\$1,200.00
7.	Electro Example	nics les: Televisions and radios; audio, video, stereo, and digital equipment; com music collections; electronic devices including cell phones, cameras, mo	•	
	✓ No	s. Describe		
8.		ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, picture stamp, coin, or baseball card collections; other collections, memorabilia,		
	✓ No ☐ Yes	s. Describe		
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, po canoes and kayaks; carpentry tools; musical instruments	ool tables, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe		
10.	Firearn Exampl	ns les: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No	s. Describe		
11.	Clothes Example	s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	S	
	□ No ✓ Yes	s. Describe Necessary wearing apparel		\$100.00
12.	·	y les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he gold, silver	eirloom jewelry, watches, gems,	
	✓ No ☐ Yes	s. Describe		
13.		rm animals les: Dogs, cats, birds, horses		
	✓ No	s. Describe		
14.	Any otl	ner personal and household items you did not already list, including any list	/ health aids you	
		s. Give specific ormation		
15.		e dollar value of all of your entries from Part 3, including any entries for	_	\$1,300.00

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Deb	tor 1	Elaine Chew L	.ambros	Case number (if ki	nown)
Pa	art 4:	Describe Yo	our Financial As	ssets	
Doy	you own	or have any leg	al or equitable inter	rest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Exampl	es: Money you ha	ave in your wallet, in	your home, in a safe deposit box, and on hand when you	file your
	✓ No ☐ Yes	3		Cash:	
17.	•		uses, and other simi	cial accounts; certificates of deposit; shares in credit unic ilar institutions. If you have multiple accounts with the sa	
	□ No ☑ Yes	S	. Institut	tion name:	
	17	.1. Checking a	ccount: Checl	king account number 767244650	\$1,000.00
18.	Exampl	les: Bond funds, i		with brokerage firms, money market accounts	
	✓ Yes	S	. Institution or issu		¢4 000 00
19.	an inter No Yes info	-	artnership, and join	incorporated and unincorporated businesses, includint venture	\$1,000.00 ng ownership:
20.	Negotia	ıble instruments ir	nclude personal ched	er negotiable and non-negotiable instruments cks, cashiers' checks, promissory notes, and money orde nnot transfer to someone by signing or delivering them.	rs.
	info	s. Give specific ormation about m	. Issuer name:		
21.		nent or pension a les: Interests in IF profit-sharing	RA, ERISA, Keogh, 4	401(k), 403(b), thrift savings accounts, or other pension of	r
	<u> </u>	s. List each count separately.	Type of account:	Institution name:	
			Pension plan:	Pension from employer / former employer	Unknown

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Deb	tor 1 Elaine Chew Lambros	Case number (if known)							
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you m Examples: Agreements with landlords, prepaid rent, public utilitic companies, or others	• •							
	✓ No ✓ Yes Institution name	or individual:							
23.	Annuities (A contract for a specific periodic payment of money								
	✓ No ✓ Yes Issuer name and description:	, ,							
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).								
	✓ No ☐ Yes Institution name and description. S	Separately file the records of any interests. 11 U.S.C.	§ 521(c)						
25.	Trusts, equitable or future interests in property (other than a		3 (-)						
	powers exercisable for your benefit ☑ No ☐ Yes. Give specific information about them								
26.	Patents, copyrights, trademarks, trade secrets, and other in Examples: Internet domain names, websites, proceeds from roy	* * *							
	NoYes. Give specific information about them								
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative as: ☑ No ☐ Yes. Give specific information about them	sociation holdings, liquor licenses, professional licens	ses						
Mor	ney or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.						
28.	Tax refunds owed to you								
	✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years	Federal: State: Local:							
29.	Family support								
	Examples: Past due or lump sum alimony, spousal support, chi	lid support, maintenance, divorce settlement, property	settlement						
	Yes. Give specific information	Alimony:							
		Maintenance:							
		Support:							
		Divorce settlement:							
		Property settlement:	:						

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Deb	or 1 Elaine Chew Lambros Case number (if known)	
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	✓ No Yes. Give specific information	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's ins ✓ No ✓ Yes. Name the insurance	surance
	company of each policy and list its value Company name: Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died	
	✓ No Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	✓ No Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
	✓ No Yes. Describe each claim	
35.	Any financial assets you did not already list	
	✓ No Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$2,000.00
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List a	ny real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	✓ No. Go to Part 6. ☐ Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned	ciains of exemptions.
	✓ No Yes. Describe	
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	✓ No Yes. Describe	
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
	✓ No Yes. Describe	

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Debt	tor 1	Elaine Chew Lambros	Case number (if known)	
41.	Invento	ту		
	✓ No ☐ Yes	. Describe		
42.	Interest	s in partnerships or joint ventures		
	✓ No ☐ Yes	. Describe Name of entity:	% of ownership:	
43.	Custom	er lists, mailing lists, or other compilations		
	✓ No ☐ Yes	Do your lists include personally identifiable information (as defined in No in the No	ned in 11 U.S.C. § 101(41A))?	
44.	Any bus	siness-related property you did not already list		
	✓ No ☐ Yes	. Give specific information.		
45.		dollar value of all of your entries from Part 5, including any entried for Part 5. Write that number here		\$0.00
Da	ort 6:	Describe Any Farm- and Commercial Fishing-Related I	Property Vou Own or Have a	n Interest In
Га		f you own or have an interest in farmland, list it in Part 1.	Property fou Own or flave a	ii iiiterest iii.
46.	Do you	own or have any legal or equitable interest in any farm- or comme	rcial fishing-related property?	
		Go to Part 7. Go to line 47.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm ar	nimals es: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes			
48.	Crops	either growing or harvested		
	_	. Give specific		
49.	Farm ar	nd fishing equipment, implements, machinery, fixtures, and tools o	f trade	
	☑ No □ Yes			
50.	Farm ar	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes			
51.	Any far	n- and commercial fishing-related property you did not already list	t	
		. Give specific mation		
52.		dollar value of all of your entries from Part 6, including any entried for Part 6. Write that number here		\$0.00

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Deb	otor 1	Elaine Chew Lambros	Case nu	ımber (if known)		
P	art 7:	Describe All Property You Own or Have an Int	erest in That You [Did Not List Abov	е	
53.	•	have other property of any kind you did not already list? les: Season tickets, country club membership	?			
	✓ No	s. Give specific information.				
54.	Add th	e dollar value of all of your entries from Part 7. Write tha	t number here	>		\$0.00
P	art 8:	List the Totals of Each Part of this Form				
55.	Part 1:	Total real estate, line 2		→		\$0.00
56.	Part 2:	Total vehicles, line 5	\$1,000.00			
57.	Part 3:	Total personal and household items, line 15	\$1,300.00			
58.	Part 4:	Total financial assets, line 36	\$2,000.00			
59.	Part 5:	Total business-related property, line 45	\$0.00			
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7:	Total other property not listed, line 54	\$0.00			
62.	Total p	personal property. Add lines 56 through 61	\$4,300.00	Copy personal property total	+	\$4,300.00
63.	Total o	of all property on Schedule A/B. Add line 55 + line 62				\$4,300.00

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Fill in this info	ormation to iden			
Debtor 1	Elaine First Name	Chew Middle Name	Lambros Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the	RICT OF ILLINOIS	Check if this is an	
Case number (if known)				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property `	You Claim as Exempt
---------	-------------------------	---------------------

1.	Which set of exemptions are you claiming? ✓ You are claiming state and federal nonban ✓ You are claiming federal exemptions. 11 to	kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	• (,,,,	,
	ef description of the property and line on nedule A/B that lists this property	Current value of the portion you own		Amount of the Specific laws that allow exempte exemption you claim	
		Copy the value from Schedule A/B		ck only one box for h exemption	
200	of description: O3 Nissan Altima (approx. 200300 miles) of from Schedule A/B:	\$1,000.00		100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c) (Claimed: \$1,000.00 100% of fair market value, up to any applicable statutory limit)
Ho etc	of description: usehold goods, furnishings, appliances, e from Schedule A/B: 6	\$1,200.00		100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b) (Claimed: \$1,200.00 100% of fair market value, up to any applicable statutory limit)

3.	Are you c	laiming a	homestead	exemption of	f more than	\$160,375?
----	-----------	-----------	-----------	--------------	-------------	------------

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

\square		Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
Ц	□ I I I I I	
		Yes

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Debtor 1	Elaine Chew Lambros		Case number	r (if known)
Part 2:	Additional Page			
	iption of the property and line on /B that lists this property	Current value of the portion you own	 ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	eck only one box for h exemption	
Brief description: Necessary wearing apparel Line from Schedule A/B:11		\$100.00	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e) (Claimed: \$100.00 100% of fair market value, up to any applicable statutory limit)
Brief description: Checking account number 767244650 Line from Schedule A/B: 17.1		\$1,000.00	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b) (Claimed: \$1,000.00 100% of fair market value, up to any applicable statutory limit)
Brief description: Stock in Eli Lilly company Line from Schedule A/B:18		\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	otion: com employer / former employer chedule A/B:21	Unknown	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006

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Fill i	n this inf	ormation to	identify your case	:				
Debto	or 1	Elaine	Chew	Lambros				
		First Name	Middle Name	Last Name				
Debto								
(Spou	use, if filing)	First Name	Middle Name	Last Name				
Unite	d States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLIN	OIS			
Case	number					_	1 Observit Abia	:
(if kno	own)					L	Check if this amended filing	
Offici	ial Farm	106D						
-	ial Form							
Sche	edule D	: Creditors	Who Have Cla	ims Secured	by Property			12/15
Be as o	complete a	nd accurate as	possible. If two marri	ed people are filing	ogether, both are	e equally resp	onsible for sup	pplying
		•	ce is needed, copy the es, write your name an	•	•	ne entries, an	d attach it to th	is form.
On the	top or any	additional page	ss, write your name an	id case ildiliber (ii k	iowiij.			
1. Do	any credi	tors have claim	s secured by your pro	perty?				
✓	No. Che	ck this box and	submit this form to the o	court with your other	chedules. You ha	ve nothing els	se to report on the	nis form.
	Yes. Fill	in all of the info	rmation below.					
Part	1· Lis	t All Secured	1 Claims					
-i ai t	LIS	All Occure	Jiulillo					
2. Li:	st all secur	ed claims. If a	creditor has more than	one secured				
cla			ely for each claim. If mo		Column A	Colu	mn B	Column C

List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

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Fill in this inf	ormation to ide	ntify your ca	ase:						
Debtor 1	Elaine	Chew	Lambros]					
	First Name	Middle Name	Last Name						
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name						
United States Ba	nkruptcy Court for th	e: NORTHER	N DISTRICT OF ILLINOIS						
Case number (if known)								Check if this is a amended filing	an
Official Form	106E/F								
Schedule E	F: Creditors	Who Have	e Unsecured Claims						12/15
on Schedule A/B: Do not include an If more space is n to this page. On t	Property (Official F y creditors with pa leeded, copy the Pa	form 106A/B) a tially secured rt you need, fi onal pages, w	acts or unexpired leases that country on Schedule G: Executory Conclaims that are listed in Schedule II it out, number the entries in the rite your name and case number secured Claims	ntraci D: C boxes	ts an redit s on	d Une ors W the le	xpire ho H	ed Leases (Officia old Claims Secur	l Form 106G). ed by Property.
	tors have priority u								
•	to Part 2.	iscourca ciam	ns agamst you:						
✓ Yes.									
claim. For ea show both pri more space is	ch claim listed, ident ority and nonpriority	ify what type of amounts. As m unsecured clain	creditor has more than one priority of claim it is. If a claim has both prior nuch as possible, list the claims in a ns, fill out the Continuation Page of	ity and Iphabe	d nor etical	priorit order	y amo acco	ounts, list that clain	m here and or's name. If
(For an explai	nation of each type o	f claim, see the	e instructions for this form in the inst			oklet. I claim	1	Priority amount	Nonpriority amount
2.1					¢.	2,421	52	\$2,421.52	\$0.00
Dept. of the Tre	asury			_				ΨΖ,4Ζ1.3Ζ	φυ.υυ
Priority Creditor's Nam			Last 4 digits of account number	7		7			
Number Street	e del vice		When was the debt incurred?	04/1	5/20	16		-	
			As of the date you file, the claim	is: C	heck	all tha	t app	ly.	
Cincinneti	011 47	.000	☐ Contingent ☐ Unliquidated						
Cincinnati City		i999 Code	Disputed						
Who incurred the			Type of PRIORITY unsecured cla	aim:					
Debtor 1 only Debtor 2 only			Domestic support obligations		wo th		ornm	ont	
Debtor 1 and [Taxes and certain other debts Claims for death or personal ir	-		-		ent	
<u> </u>	the debtors and and		intoxicated	. ,					
ш	claim is for a comm	unity debt	Other. Specify						
Is the claim subje	CL TO OHSEL!								
Yes									

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Debtor 1	Elaine Chew Lambros	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
	y creditors have nonpriority unsecured to. You have nothing to report in this part res	I claims against you? Submit this form to the court with your other schedules.	
If a cre type of	editor has more than one nonpriority unse f claim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed luded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2.	•
			Total claim
	ankruptcy Dept. reditor's Name 97871 Street	Last 4 digits of account number 7 6 7 2 When was the debt incurred? 2010 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$8,716.00
Debtor Debtor Debtor At least Check Is the claim	State ZIP Code red the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
	merica - Bankruptcy Dept. reditor's Name 7054 Street	Last 4 digits of account number 7 6 7 2 When was the debt incurred? 1997 As of the date you file, the claim is: Check all that apply.	\$6,149.00
Debtor Debtor Debtor At least	State ZIP Code red the debt? Check one. 1 only	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	

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Debtor 1 Elaine Chew Lambros	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$1,352.00
BBY/CBNA - Bankruptcy Dept.	Last 4 digits of account number 7 6 7 2	
Nonpriority Creditor's Name	When was the debt incurred? 2011	
50 Northwest Point Rd. Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	Unliquidated	
Elk Grove Village IL 60007	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No Yes		
4.4		\$1,206.00
Chase Card - Bankruptcy Dept. Nonpriority Creditor's Name	_ Last 4 digits of account number	
PO Box 15298	When was the debt incurred? 2007	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	□ Disputed	
Wilmington DE 19850		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ☑ No ☐ Yes		
4.5		\$3,941.00
Chase Card - Bankruptcy Dept.	Last 4 digits of account number 7 6 7 2	
Nonpriority Creditor's Name	When was the debt incurred? 2006	
PO Box 15298 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Wilmington DE 19850	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
√ No		
Yes		

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Debtor 1 Elaine Chew Lambros	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$10,227.00
Chase Card - Bankruptcy Dept.	Last 4 digits of account number 7 6 7 2	
Nonpriority Creditor's Name	When was the debt incurred? 2007	
PO Box 15298		
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
Wilmington DE 19850		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Citali Guid	
✓ No ☐ Yes		
4.7		\$10,986.00
Chase Card - Bankruptcy Dept.	Last 4 digits of account number 7 6 7 2	
Nonpriority Creditor's Name	When was the debt incurred? 2010	
PO Box 15298 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Million in out and DE 40050	Disputed	
WilmingtonDE19850CityStateZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
▼ No		
Yes		
4.8		
4.0		\$2,568.00
DuPage Medical Group Nonpriority Creditor's Name	_ Last 4 digits of account number 7 3 5 8	
1100 W. 31st Street, Suite 400	When was the debt incurred? 09/01/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Downers Grove IL 60515	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Collecting for - Medical Service	
Is the claim subject to offset?		
☑ No		
Yes		

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Part 2: Your NONPRIORITY Unsecured Claims Continuation Page After listing any entries on this page, number them sequentially from the	
After listing any entries on this page, number them sequentially from the	
After listing any entries on this page, number them sequentially from the previous page.	al claim
4.9	3,176.00
FEB/FRYS - Bankruptcy Dept. Last 4 digits of account number 7 6 7 2	
Nonpriority Creditor's Name When was the debt incurred? 2010	
280 W 10200 S, Suite 200 Number Street As of the date you file, the claim is: Check all that apply.	
Contingent	
Unliquidated	
Sandy UT 84070 Disputed	
City State ZIP Code Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	
Debtor 1 only Debtor 1 only Obligations arising out of a separation agreement or divorce	
Debtor 2 only that you did not report as priority claims	
Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Other Specific	
✓ Other. Specify	
Credit Card Is the claim subject to offset?	
✓ No	
▼ Yes	
4.10	7,917.00
Navient Last 4 digits of account number 8 4 9 1	
Nonpriority Creditor's Name PO Box 9635 When was the debt incurred? 09/08/2015	
Number Street As of the date you file, the claim is: Check all that apply.	
Contingent	
Unliquidated	
Wilkes-Barre PA 18773	
City State ZIP Code Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only Obligations origins out of a constraint and increase.	
Debtor 2 only	
that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only	
At least one of the debtors and another Other. Specify	
Check if this claim is for a community debt	
Is the claim subject to offset?	
<u>₩</u> No	
Yes	
4.11	\$757.00
	\$131.00
Nonpriority Creditor's Name	
130 E. Randolph Drive	
Number Street As of the date you file, the claim is: Check all that apply.	
Contingent Unliquidated	
Disputed	
Chicago IL 60601	
Chicago IL 60601 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one	
Chicago IL 60601 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Student loans	
Chicago City State ZIP Code Who incurred the debt? Debtor 1 only Debtor 2 only City State ZIP Code Check one. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Chicago City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another. ✓ Debts to pension or profit-sharing plans, and other similar debts	
Chicago City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ✓ Other Monor III unsecured claim: Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	
Chicago City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ✓ Check one. ✓ Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Collecting for - Utility Bill	
Chicago City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ✓ Other Monor III unsecured claim: Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	

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Debtor 1	Elaine Chew Lambros	Case number (if known)	
Part 4:	Add the Amounts for Each Type of Unsecured Claim		

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$2,421.52
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. _	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$2,421.52
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$7,917.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. _	\$49,078.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$56,995.00

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Fill in this in	formation to i			
Debtor 1	Elaine First Name	Chew Middle Name	Lambros Last Name	
Debtor 2 (Spouse, if filing)) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court fo	r the: NORTHERN D	ISTRICT OF ILLINOIS	
Case number (if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this ir	nformation to i	dentify your case:		
Debtor 1	Elaine	Chew	Lambros	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name	_
United States B	ankruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	_
Case number				☐ Check if this is an
(if known)				amended filing
000 : 15	40011			
Official Forr				
Schedule F	l: Your Cod	ebtors		12/15
needed, copy the page. On the top 1. Do you have No	e Additional Page p of any Addition	e, fill it out, and numbe al Pages, write your na	r the entries in the boxes	g correct information. If more space is on the left. Attach the Additional Page to this known). Answer every question.
✓ Yes				
	-	-		tory? (Community property states and territories Texas, Washington, and Wisconsin.)
<u> </u>	to line 3.			
Yes. D)	rmer spouse, or legal e	quivalent live with you at the	e time?
3. In Column 1 person sho creditor on	I, list all of your c wn in line 2 again Schedule D (Offic	as a codebtor only if	that person is a guarantor dule E/F (Official Form 100	ebtor if your spouse is filing with you. List the r or cosigner. Make sure you have listed the 6E/F), or <i>Schedule G</i> (Official Form 106G). Use
Column	1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1 Lambro	s, Nickos J			☐ Schedule D, line
	aple Ave. Street			Schedule E/F, line 2.1
Apt. 8-C				Schedule G, line
Downer	rs Grove	IL	60515	Dept. of the Treasury
City	•	State	ZIP Code	

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Fill in this inforr	nation to identify				
Debtor 1	Elaine First Name	Chew Middle Name	Lambros Last Name	Che	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	An amended filing
United States Bank	ruptcy Court for the:	NORTHERN DI	STRICT OF ILLINOIS	□	A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)					MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Docoribo	Employ	mont
Part I:	Describe		yment

1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status Occupation	✓ Employed☐ Not employedNurse		☐ Employed ☐ Not employed	
	Include part-time, seasonal, or self-employed work.	Employer's name	Alternatie Home Ho	ealth + Care, Inc.		
Occupation may include student or homemaker, if it applies.		Employer's address	634 N. Cass Ave. Number Street		Number Street	
			Westmont City	IL 60559 State Zip Code	City State Zip Code	
		How long employed th	nere? <u>07/16/2016</u>			

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$1,332.50	\$0.00
3.	Estimate and list monthly overtime pay.	3. 👍	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$1,332.50	\$0.00

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Elaine Chew Lambros		Case nun	nber ((if known)			
			F	or Debtor 1		r Debtor : n-filing s		,	
	Сор	y line 4 here	4 .	\$1,332.50			.00	_	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$101.95	_		.00		
	5b.	Mandatory contributions for retirement plans	5b.	\$0.00	_		.00		
		Voluntary contributions for retirement plans	5c.	\$0.00	_		0.00		
		Required repayments of retirement fund loans	5d.	\$0.00	_		0.00		
		Insurance Property of the Control of	5e.	\$0.00	-		0.00		
	5f.	Domestic support obligations	5f.	\$0.00 \$0.00	-		0.00		
	•	Union dues Other deductions.	5g.	Ψ0.00	-	φυ	.00		
	JII.	Specify: L - withholding	_ 5h. +	\$29.58	_	\$0	.00		
6.	Add 5g +	I the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5h$.	6.	<u>\$131.53</u>	_	\$0	.00		
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$1,200.97	_	\$0	.00		
8.		all other income regularly received:							
	8a.	Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00	_	\$0	0.00		
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b.	Interest and dividends	8b.	\$0.00		\$0	.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	_	\$0	.00		
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d.	Unemployment compensation	8d.	\$0.00	_	\$0	.00		
	8e.	Social Security	8e.	\$0.00		\$1,282	2.00		
	8f.	Other government assistance that you regularly receive							
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.	\$0.00		\$0	.00		
	8g.	Pension or retirement income	– 8g.	\$0.00	_	\$0	.00		
	8h.	Other monthly income.			_				
		Specify:	_ ^{8h.} +	\$0.00	_	\$0	.00		
9.	Add	l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00		\$1,282	2.00		
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$1,200.97	+	\$1,282	2.00]=[\$2,482.97
11.		e all other regular contributions to the expenses that you list in	Schedule	. J.					
	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.								
	Do r	not include any amounts already included in lines 2-10 or amounts the	at are not	t available to pay e	xpen	ses listed	l in Sc	hedi	ıle J.
	Spe	cify:					11.	+ _	\$0.00
12.	inco	I the amount in the last column of line 10 to the amount in line 11 me. Write that amount on the Summary of Your Assets and Liabilitie applies.					12.		\$2,482.97 Combined nonthly income
13.	Dov	you expect an increase or decrease within the year after you file	this form	1?					, ,
	<u>N</u>	No. None.							
		Yes. Explain:							
	_								

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F	ill in this inform	ation to identif	y your case:			Cho	ck if this	io.		
	Debtor 1	Elaine	Chew	Lambr	os			nded filing		
		First Name	Middle Name	Last Nan	ne			ement showing		l
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nan	ne		chapter	13 expenses as g date:	s of the	
	United States Bankru	uptcy Court for the:	NORTHERN DIS	STRICT OF	ILLINOIS		MM / DE) / YYYY	_	
	Case number (if known)									
0	fficial Form 10	6J								
S	chedule J: Yo	ur Expenses	6							12/15
co na	as complete and ac rrect information. If me and case numbe Part 1: Descril	more space is ne	eded, attach anothe ver every question.	er sheet to th						
1.	Is this a joint case	?								
2.	_ No	Debtor 2 must file	parate household? Official Form 106J-		for Separate Housel	nold of	f Debtor 2	2.		
	Do not list Debtor 1 Debtor 2.		Yes. Fill out this inf for each dependent.		Dependent's relation Debtor 1 or Debtor		p to	Dependent's age	Does dep	
	Do not state the de names.	pendents'							Yes No Yes No Yes No Yes No No Yes No Yes No Yes	
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes							
F	Part 2: Estima	te Your Ongoiı	ng Monthly Expe	enses						
to	timate your expense report expenses as a form and fill in the	of a date after the								
	clude expenses paid ch assistance and h		-	-				Your expens	es	
4.			nses for your residency rent for the groun				4		\$5	06.00
	If not included in I	ine 4:								
	4a. Real estate ta	xes					4	a		
	4b. Property, hom	eowner's, or renter	s insurance				4	b		
	4c. Home mainter	nance, repair, and u	ıpkeep expenses				4	c		
	4d Homeowner's	association or cond	dominium dues				4		\$ 3	00 00

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Deb	otor 1 Elaine Chew Lambros	Case number (if known)	
		Your expenses	s
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$175.00
	6b. Water, sewer, garbage collection	6b	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$270.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7.	\$600.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	
10.	Personal care products and services	10.	
11.	Medical and dental expenses	11.	
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$120.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	
14.	Charitable contributions and religious donations	14.	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	 15b.	\$270.00
	15c. Vehicle insurance	15c.	
	15d. Other insurance. Specify: Student Loan	15d.	\$89.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify:	17c	
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify:	19.	

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Deb	tor 1	Elaine Chew Lambros	Case number (if known)					
20.	 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 							
	20a.	Mortgages on other property	20a					
	20b.	Real estate taxes	20b					
	20c.	Property, homeowner's, or renter's insurance	20c					
	20d.	Maintenance, repair, and upkeep expenses	20d					
	20e.	Homeowner's association or condominium dues	20e					
21.	Other	r. Specify:	21. +					
22.	Calcu	ulate your monthly expenses.						
	22a.	Add lines 4 through 21.	22a	\$2,330.00				
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	_				
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$2,330.00				
23.	Calcu	ulate your monthly net income.						
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. <u> </u>	\$2,482.97				
	23b.	Copy your monthly expenses from line 22c above.	23b. –	\$2,330.00				
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$152.97				
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you file	e this form?					
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
		No. Yes. Explain here: None.						

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Debtor 1 Elaine Chew Lambros First Name Middle Name Last Name Debtor 2 Spouse, if filing) First Name Middle Name Last Name
Debtor 2
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$4,300.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$4,300.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$2,421.52
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$56,995.00
	Your total liabilities	\$59,416.52
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,482.97
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,330.00

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Deb	otor 1	Elaine Chew Lambros	Case number (if known)			
Р	art 4:	Answer These Questions for Administrative and Statistics	ical Records			
6.	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?				
		lo. You have nothing to report on this part of the form. Check this box and sees	ubmit this form to the court with yo	ur other schedules.		
7.	What I	kind of debt do you have?				
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.					
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$2,715.00					
9.	Сору	the following special categories of claims from Part 4, line 6 of Schedul	e <i>E/F:</i>			
			Total claim			
	From	Part 4 on Schedule E/F, copy the following:				
	9a. D	Oomestic support obligations. (Copy line 6a.)	\$0.0	<u>0</u>		
	9b. T	axes and certain other debts you owe the government. (Copy line 6b.)	\$2,421.5	2		
	9c. C	claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.0	<u>0</u>		
	9d. S	tudent loans. (Copy line 6f.)	\$7,917.0	<u>0</u>		
	9e. O	Obligations arising out of a separation agreement or divorce that you did not r	eport as \$0.0	0		

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$10,338.52

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Fill in this information to identify your case:							
Debtor 1	Elaine First Name	Chew Middle Name	Lambros Last Name	_			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_			
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	_			
Case number (if known)							
Official Form	106Dec						

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below							
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
☑ No							
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
Under penalty of perjury, I declare that I have re true and correct.	ad the summary and schedules filed with this declaration and that they are						
X /s/ Elaine Chew Lambros Elaine Chew Lambros, Debtor 1	X Signature of Debtor 2						
Date 01/27/2017 MM / DD / YYYY	Date						

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	Fill in this inf	ormation to ider	ntify your	case:			
	Debtor 1	Elaine	Chew	Lambros			
		First Name	Middle Nam	e Last Name			
	Debtor 2 Spouse, if filing)	First Name	Middle Nam	e Last Name			
 ι	Jnited States Bar	nkruptcy Court for the	e: NORTHE	ERN DISTRICT OF IL	LINOIS		
	Case number	, ,				Chapte if this	in on
(if known)					Check if this amended fili	
0	fficial Form	107					
_			ffairs fo	r Individuals Fil	ling for Bankı	ruptcy	04/16
yo	orrect informatio our name and ca	n. If more space is se number (if know	needed, att n). Answer	ach a separate sheet to	o this form. On the	re equally responsible for su top of any additional pages, Before	
1.		current marital stat	us?				
2.	☑ No		•	there other than where ast 3 years. Do not incl		ow.	
3.	Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)						
	✓ No ☐ Yes. Mak	e sure you fill out Sc	hedule H: Y	our Codebtors (Official F	Form 106H).		
I	Part 2: Exp	olain the Source	s of Your	Income			
4.	Fill in the total	amount of income ye	ou received	or from operating a bu from all jobs and all bus ne that you receive toge	inesses, including pa		endar years?
	□ No ☑ Yes. Fill i	n the details.					
			D	ebtor 1		Debtor 2	
				urces of income eck all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	om January 1 of e date you filed	f the current year ui for bankruptcy:	ntil 🗹	Wages, commissions, bonuses, tips	\$615.00	Wages, commissions, bonuses, tips	
				Operating a business		Operating a business	
	or the last calend	·		Wages, commissions, bonuses, tips	\$29,000.00	Wages, commissions, bonuses, tips	
(Ja	anuary 1 to Dece	mber 31, <u>2016</u>) YYYY		Operating a business		Operating a business	
Fo	or the calendar y	ear before that:		Wages, commissions, bonuses, tips	\$57,451.00	Wages, commissions, bonuses, tips	
(Ja	anuary 1 to Dece	mber 31, 2015)	П	Operating a business		Operating a business	

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Deb	tor 1	Elaine Cl	new Lambros	Case number (if known)					
5.	Include in	ncome reg yment; and bling and	ny other income during this year or the two previous calend gardless of whether that income is taxable. Examples of other in d other public benefit payments; pensions; rental income; intere lottery winnings. If you are in a joint case and you have income	ncome are alimony; child support; Social Security; st; dividends; money collected from lawsuits; royalties;					
	List each source and the gross income from each source separately. Do not include income that you listed in line 4.								
	✓ No ☐ Yes. Fill in the details.								
P	Part 3: List Certain Payments You Made Before You Filed for Bankruptcy								
6.	Are eithe	er Debtor	1's or Debtor 2's debts primarily consumer debts?						
	□ No.		Debtor 1 nor Debtor 2 has primarily consumer debts. Cons d by an individual primarily for a personal, family, or household						
		During t	he 90 days before you filed for bankruptcy, did you pay any cred	ditor a total of \$6,425* or more?					
		□ No.	Go to line 7.						
		☐ Yes.	List below each creditor to whom you paid a total of \$6,425* or total amount you paid that creditor. Do not include payments f child support and alimony. Also, do not include payments to a	or domestic support obligations, such as					
		* Subjec	ct to adjustment on 4/01/19 and every 3 years after that for case	s filed on or after the date of adjustment.					
	Yes.	Debtor	1 or Debtor 2 or both have primarily consumer debts.						
		During t	he 90 days before you filed for bankruptcy, did you pay any cred	ditor a total of \$600 or more?					
		▼ No.	Go to line 7.						
		☐ Yes.	List below each creditor to whom you paid a total of \$600 or m creditor. Do not include payments for domestic support obliga Also, do not include payments to an attorney for this bankrupto	tions, such as child support and alimony.					
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligation such as child support and alimony.									
	✓ No ☐ Yes.	List all pa	ayments to an insider.						

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Debtor 1		Elaine Chew Lambros	Case number (if known)				
В.		l year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that ed an insider?					
	Include payments on debts guaranteed or cosigned by an insider.						
✓ No✓ Yes. List all payments that benefited an insider.							
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosure	es				
9.	List all s	1 year before you filed for bankruptcy, were you a party in any lawsuit such matters, including personal injury cases, small claims actions, divorce ations, and contract disputes.	•				
	✓ No ☐ Yes	s. Fill in the details.					
10.	seized,	1 year before you filed for bankruptcy, was any of your property repos or levied? all that apply and fill in the details below.	sessed, foreclosed, garnished, attached,				
	<u> </u>	Go to line 11. s. Fill in the information below.					
11.		90 days before you filed for bankruptcy, did any creditor, including a bast from your accounts or refuse to make a payment because you owed					
	✓ No ☐ Yes	s. Fill in the details.					
12.		1 year before you filed for bankruptcy, was any of your property in the rs, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of				
	✓ No ☐ Yes	s					
P	art 5:	List Certain Gifts and Contributions					
13.	Within	2 years before you filed for bankruptcy, did you give any gifts with a to	tal value of more than \$600 per person?				
	✓ No ☐ Yes	s. Fill in the details for each gift.					
14.		2 years before you filed for bankruptcy, did you give any gifts or contr charity?	butions with a total value of more than \$600				
	✓ No ☐ Yes	s. Fill in the details for each gift or contribution.					

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Deb	otor 1	Elaine Chew L	ambros	C	ase number (if kr	nown)	
Р	art 6:	List Certain	Losses				
15.		1 year before yo lisaster, or gamb		ptcy or since you filed for bankruptcy, c	did you lose any	thing because of th	eft, fire,
	✓ No ☐ Yes	s. Fill in the detail	ls.				
Р	art 7:	List Certain	Payments or	Transfers			
16.				ptcy, did you or anyone else acting on y nkruptcy or preparing a bankruptcy peti		or transfer any prop	perty to
	-	-	_	preparers, or credit counseling agencies fo		ed for your bankrupto	cy.
	□ No ✓ Yes	s. Fill in the detail	ls.				
	un Kim	Vas Paid		Description and value of any property Attorney Fee for Chapt. 7 Petition		Date payment or transfer was made	Amount of payment
		lontrose Ave.		_	01/26/2017	\$500.00	
Num	nber Sti	reet					
				_			-
Chi City	icago	IL Star	te ZIP Code	_			
Oity		Ota	211 0000				
Ema	ail or websi	te address		-			
Pers	son Who N	Made the Payment, if	Not You	-			
17.	anyone	who promised t	to help you deal v	ptcy, did you or anyone else acting on y vith your creditors or to make payments t you listed on line 16.			perty to
	☑ No			,,			
18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?							
Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	✓ No ☐ Yes	s. Fill in the detail	ls.				
19.	you are	10 years before ye a beneficiary?		ruptcy, did you transfer any property to called asset-protection devices.)	a self-settled tr	ust or similar devic	e of which
	✓ No ☐ Yes	s. Fill in the detail	ls.				

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Deb	otor 1	Elaine Chew Lambros	Case number (if known)
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Storage Units
20.		year before you filed for bankruptcy, were any financial accounts or closed, sold, moved, or transferred?	instruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	·
	✓ No ☐ Yes	. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptourities, cash, or other valuables?	ey, any safe deposit box or other depository
	✓ No ☐ Yes	. Fill in the details.	
22.	-	ou stored property in a storage unit or place other than your home with	nin 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Else	•
23.		hold or control any property that someone else owns? Include any pr in trust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
Pa	art 10:	Give Details About Environmental Information	
or	the purp	ose of Part 10, the following definitions apply:	
ł	hazardou	nental law means any federal, state, or local statute or regulation conc s or toxic substance, wastes, or material into the air, land, soil, surfac statutes or regulations controlling the cleanup of these substances, v	e water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	al law, whether you now own, operate, or
		<i>is material</i> means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item.	ous waste, hazardous substance, toxic
₹ер	ort all no	otices, releases, and proceedings that you know about, regardless of v	when they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially li	able under or in violation of an environmental
	✓ No ☐ Yes	. Fill in the details.	
25.		ou notified any governmental unit of any release of hazardous material	?
	ب	. Fill in the details.	

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Deb	otor 1	Elaine Chew Lambros	Case number (if known)				
26. Have y orders		u been a party in any judicial or administrative proceeding under any environmental law? Include settlements and					
	✓ No ☐ Yes	. Fill in the details.					
Р	art 11:	Give Details About Your Business	s or Connections to Any Business				
27.	you own a business or have any of the following connections to any						
		A sole proprietor or self-employed in a trade. A member of a limited liability company (LLC A partner in a partnership An officer, director, or managing executive of An owner of at least 5% of the voting or equi	f a corporation				
		None of the above applies. Go to Part 12. Check all that apply above and fill in the det	ails below for each business.				
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	□ No □ Yes	. Fill in the details below.					
Р	art 12:	Sign Below					
that pro or k	t answers perty by poth. 18 b ooth. 18 b	s are true and correct. I understand that m fraud in connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3571. e Chew Lambros	Affairs and any attachments, and I declare under penalty of perjury aking a false statement, concealing property, or obtaining money or e can result in fines up to \$250,000, or imprisonment for up to 20 years,				
ļ		ew Lambros, Debtor 1	Signature of Debtor 2				
ı	Date	01/27/2017	Date				
		ch additional pages to Your Statement of F	inancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?				
Did	you pay	or agree to pay someone who is not an att	orney to help you fill out bankruptcy forms?				
	No						
		me of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)				

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Fill in this info	Fill in this information to identify your case:					
Debtor 1	Elaine First Name	Chew Middle Name	Lambros Last Name			
Debtor 2						
(Spouse, if filing)		Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						
Case number (if known)						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ Elaine Chew Lambros

Elaine Chew Lambros, Debtor 1

Date 01/27/2017 MM / DD / YYYY X

Signature of Debtor 2

Date

MM / DD / YYYY

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In	re Elaine Chew Lambros	Case No.		
		Chapter	7	
	DISCLOSURE OF COMPENSATION OF	F ATTORNEY FOR	DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in cor is as follows:	petition in bankruptcy, or	agreed to be paid to me, for	
	For legal services, I have agreed to accept	\$ [*]	1,000.00	
	Prior to the filing of this statement I have received		\$500.00	
	Balance Due	<u> </u>	\$500.00	
2.	The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify)			
3.	The source of compensation to be paid to me is:			
	☑ Debtor ☐ Other (specify)			
4.	☑ I have not agreed to share the above-disclosed compensation was associates of my law firm.	vith any other person unle	ss they are members and	
	☐ I have agreed to share the above-disclosed compensation with associates of my law firm. A copy of the agreement, together with compensation, is attached.			
5.	In return for the above-disclosed fee, I have agreed to render legal s	ervice for all aspects of th	e bankruptcy case, including:	
	a. Analysis of the debtor's financial situation, and rendering advice to bankruptcy;	o the debtor in determinin	g whether to file a petition in	
	b. Preparation and filing of any petition, schedules, statements of aff	fairs and plan which may l	pe required;	
	c. Representation of the debtor at the meeting of creditors and confi	rmation hearing, and any	adjourned hearings thereof;	

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

 01/27/2017
 /s/ Hyun Kim

 Date
 Hyun Kim
 Bar No. 6244603

 Hyun Kim
 3758 W. Monstrose Ave.

 Chicago, IL 60618
 Phone: (773) 604-8877 / Fax: (773) 604-5138

/s/ Elaine Chew Lambros

Elaine Chew Lambros

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Elaine Chew Lambros CASE NO

CHAPTER 7

Signature _____

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies t knowledge.	that the attached list of creditors is true and correct to the best of his/her
Date _1/27/2017	Signature _/s/ Elaine Chew Lambros Elaine Chew Lambros

AMEX - Bankruptcy Dept. PO Box 297871 Fort Lauderdale, FL 33329

Bank of America - Bankruptcy Dept. PO Box 17054 Wilmington, DE 19884

BBY/CBNA - Bankruptcy Dept. 50 Northwest Point Rd. Elk Grove Village, IL 60007

Chase Card - Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850

Dept. of the Treasury Internal Revenue Service Cincinnati, OH 45999

DuPage Medical Group 1100 W. 31st Street, Suite 400 Downers Grove, IL 60515

FEB/FRYS - Bankruptcy Dept. 280 W 10200 S, Suite 200 Sandy, UT 84070

Navient PO Box 9635 Wilkes-Barre, PA 18773

Nickos J Lambros 2800 Maple Ave. Apt. 8-C Downers Grove, IL 60515 People's Gas - Bankruptcy Dept. 130 E. Randolph Drive Chicago, IL 60601

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Fill in this inf	ormation to i	dentify your case	Check one box only as directed in this		
Debtor 1	Elaine Chew First Name Middle Name		Lambros Last Name	form and in Form 122A-1Supp: 1. There is no presumption of abuse.	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS				Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because	
Case number (if known)				of qualified military service but it could apply later.	
				Check if this is an amended filing	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

١.	Wha	What is your marital and filing status? Check one only.							
		Not	Not married. Fill out Column A, lines 2-11.						
		Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.							
	$\overline{\mathbf{V}}$	Married and your spouse is NOT filing with you. You and your spouse are:							
		Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.							
			Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B)						

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Column A	Column B
		Debtor 1	Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$1,435.00	\$0.00
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed	\$0.00	\$1,280.00

on line 3.

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Deb	otor 1 Elaine Chew Lambros			C	ase number (if k	nown)	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	е
5.	Net income from operating a busine	ss, profession, or	farm				
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating — expenses	\$0.00 -	\$0.00	Сору			
	Net monthly income from a business, profession, or farm	\$0.00	\$0.00	here →	\$0.00	\$0.00	
6.	Net income from rental and other re	al property					
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating — expenses	\$0.00 -	\$0.00	Сору			
	Net monthly income from rental or other real property	\$0.00	\$0.00	here →	\$0.00	\$0.00	
7.	Interest, dividends, and royalties				\$0.00	\$0.00	
8.	Unemployment compensation				\$0.00	\$0.00	
	Do not enter the amount if you conten- benefit under the Social Security Act.						
	For you			_			
	For your spouse		50.0	<u> </u>			
9.	Pension or retirement income. Do n was a benefit under the Social Securit		ount received that		\$0.00	\$0.00	
10.	Income from all other sources not li amount. Do not include any benefits r or payments received as a victim of a or international or domestic terrorism. separate page and put the total below.	eceived under the swar crime, a crime If necessary, list or	Social Security Acagainst humanity	t			
	Total amounts from separate pages, if			 +		+	
11.	Calculate your total current monthly Add lines 2 through 10 for each colum Then add the total for Column A to the	n.	i.		\$1,435.00	+ \$1,280.00	= \$2,715.00 Total current monthly income

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Debtor 1		E	Elaine Chew Lambros		Case number (if known)	
P	art 2:		Determine Whether the Means	Геst Applies to You		
12.	Calculate your current monthly income for the year. Follow these steps:			ear. Follow these steps:		
	12a.	Cop	by your total current monthly income from	line 11	Copy line 11 here → 12a. \$2,715.00	
		Mul	lultiply by 12 (the number of months in a year).		X 12	
	12b.	2b. The result is your annual income for this part of the form.		12b. \$32,580.00		
13.	Calculate the median family income that applies to you. Follow these steps:					
	Fill in	the s	state in which you live.	Illinois		
	Fill in	the r	number of people in your household.	2		
	Fill in	the r	median family income for your state and s	size of household	13. \$65,659.00	
	To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.					
1	How	How do the lines compare?				
	14a.		Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>There is no presumption of abuse</i> . Go to Part 3.			
	14b.	Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2</i> . Go to Part 3 and fill out Form 122A-2.				
P	art 3:		Sign Below			
	By	signir	ng here, I declare under penalty of perjury	that the information on this sta	tement and in any attachments is true and correct.	
			laine Chew Lambros e Chew Lambros, Debtor 1	X Signa	ature of Debtor 2	
		Date	1/27/2017	Date		
			MM / DD / YYYY		MM / DD / YYYY	
	If y	If you checked line 14a, do NOT fill out or file Form 122A-2.				

If you checked line 14b, fill out Form 122A-2 and file it with this form.